Case 24-20024 Doc 41 Filed 05/08/24 Entered 05/08/24 21:48:42 Desc Main Fill in this information to identify the case:			
Deblor Name Don's Reversion of Brach maring Lice.			
United States Bankrupicy Court for the East Chistrict of Tox as			
Case number $\underline{24} - \underline{2024}$	□ Check	k if this i	is an
	amen	ded filin	g
Official Form 425C			
			
Monthly Operating Report for Small Business Under Chapter 11			
Month: March	ad las		12/17
Date report filed:	(<u>4/26</u>	<u> 120</u>	24
Line of business: RV resort & Marina NAISC code:			
In accordance with title 28, section 1746, of the United States Code, I declare under penalty of perjury			
that I have examined the following small business monthly operating report and the accompanying attachments and, to the best of my knowledge, these documents are true, correct, and complete.			
Responsible party. Mintu Thorn-ton no behalf of	. Don'	s Bo	i reto
Responsible party. Original signature of resconsible party Misty Thornton to haif of Make Thornton	Ban	Mai	ina
Printed name of responsible party MISTOR Thoragon	LLC		
1. Questionnaire			
Answer all questions on behalf of the debtor for the period covered by this report, unless otherwise indicate		<u> </u>	
	• •	No	N/A
If you answer No to any of the questions in lines 1-9, attach an explanation and label it Exhibit if Did the business operate during the entire reporting period?			
2. Do you plan to continue to operate the business next month? 2. The young plan to continue to operate the business next month?	, 13 (
3. Have you paid all of your bills on time?	العالم حوق	<u> </u>	
4. Did you pay your employees on time?	,,¥⊒ ∑		
5. Have you deposited all the receipts for your business into debtor in possession (DIP) accounts?	157 152		
b. Have you timely filed your tax returns and paid all of your taxes? $\{\begin{array}{cccccccccccccccccccccccccccccccccccc$	Ŕ		
see you writely mod an other required government fillings?	Þ		<u>_</u>
8 Are you current on your quarterly fee payments to the U.S. Trustee of Bankruptcy Administrator?	À		
9 Have you timely paid all of your insurance premiums?	įχį		
If you answer Yes to any of the questions in lines 10-18, attach an explanation and label it Exhib	jit B.		
10 Do you have any bank accounts open other than the DIP accounts?		Ø	
11. Have you sold any assets other than inventory?		Ì	그
12. Have you sold or transferred any assets or provided services to anyone related to the DIP in any way?	=	Ø	
13. Did any insurance company cancel your policy?		20	ı.
14. Did you have any unusual or significant unanticipated expenses?	⊐	Ģ	
15. Have you borrowed money from anyone or has anyone made any payments on your behalt?		5	<u> </u>
16. Has anyone made an investment in your business?	ם	Ž	
Official Form 425C Monthly Operating Report for Small Business Under Chapter 11	pao	e 1	

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Case 24-20024 Doc 41 Filed 05/08/24 Entered 05/08/24 21:48:42 Desc M	<i>l</i> lain
Deblor Note Don's Bare foot Brack Marria LLC ase number_211-	20024
17. Have you paid any bills you owed before you filed bankruptcy?	□ \ 4 =
18. Have you allowed any checks to clear the bank that were issued before you filed bankruptcy?	
	ال بھر ت
2. Summary of Cash Activity for All Accounts	
19. Total opening balance of all accounts	
This amount must equal what you reported as the cash on hand at the end of the month in the property. If this is your first report, report the total cash on hand as of the date of the filing of this cash.	revious s 507.35
20. Total cash receipts	
Attach a listing of all cash received for the month and label it Exhibit C. Include all cash received even if you have not deposited it at the bank, collections on receivables, credit card deposits, cash received from other parties, or loans, gifts, or payments made by other parties on your behalf. Do not attach bank statements in lieu of Exhibit C.	
Report the total from Exhibit Chore.	,243.04
21. Total cash disbursements	<u> </u>
Attach a fisting of all payments you made in the month and label it Exhibit D. List the date paid, payee, purpose, and amount, include all cash payments, debit card transactions, checks issued even if they have not cleared the bank, outstanding checks issued before the bankruptcy was filed that were allowed to clear this month, and payments made by other parties on your behalf. Do not attach bank statements in fieu of Exhibit D.	· (2 - 0 - (2
Report the total from Exhibit D here.	<u>, 7</u> 02.43
22. Net cash flow	
Subtract line 21 from line 20 and report the result here. This amount may be different from what you may have calculated as <i>not profit</i> .	+ s_540.61
23. Cash on hand at the end of the month	
Add line 22 + line 19. Report the result here.	
Report this figure as the cash on hand at the beginning of the month on your next operating report.	= \$ <u> 1513</u> .83
This amount may not match your bank account balance because you may have outstanding check have not cleared the bank or deposits in transit.	s that
3. Unpaid Bilfs	<u>-</u>
Attach a list of all debts (including taxes) which you have incurred since the date you filed bankrupt have not paid. Label it Exhibit E. Include the date the debt was incurred.	
have not paid. Label it Exhibit E. Include the date the debt was incurred, who is owed the money, the purpose of the debt, and when the debt is due. Report the total from Exhibit E here.	cy but na
24. Total payables IRS PAYTON TOXXES applieR \$1500.00	s <u>1500 60</u>
	— ·— ·—

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Debtor Name Don's Borotoot Maria Maria

Case number 24 - 20037

4. Money Owed to You

Attach a list of all amounts owed to you by your customers for work you have done or merchandisc you have sold. Include amounts owed to you both before, and after you filed bankruptcy. Label it Exhibit F Identify who owes you money, how much is owed, and when payment is due. Report the total from Exhibit F here.

25. Total receivables

(Exhibit F)

s MA

5. Employees

- 26. What was the number of employees when the case was filed?
- 27. What is the number of employees as of the date of this monthly report?

 <u> </u>	
4	

6. Professional Fees

- 28. How much have you paid this month in professional fees related to this bankruptcy case?
- 29. How much have you paid in professional fees related to this bankruptcy case since the case was filed?
- 30. How much have you paid this month in other professional fees?
- 31. How much have you paid in total other professional fees since tiling the case?

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7. Projections

Compare your actual cash receipts and disbursements to what you projected in the previous month. Projected figures in the first month should match those provided at the initial debtor interview, if any,

	Projected		_Column 8 Actual ≈	Column C
	Copy lines 36-37 from the previous month's report,		Capy lines 20-22 of this report	Subtract Column B from Column A.
32. Cash receipts	s_ <u>&&_</u> 000		s 31 243 (4 =	_{s_} <u>১</u> মৃ০ ৫।
33. Cash disbursements	s <u> 20,00</u> 0	-	s <u>70,70</u> 2,43=	s <u>10,000</u> 00
34. Net cash flow	s_ <u>10, by e</u>	-	s 540, (c) =	\$ <u>9459.3</u> 9

- Total projected cash receipts for the next month;
- 36. Total projected cash disbursements for the next month:
- 37. Total projected net cash flow for the next month:

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=<u>\$}0,600.</u>00

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Case 24-20024 Doc 41 Filed 05/08/24 Entered 05/08/24 21:48:42 Desc Main Document Page 7 of 16

Debter Name Document Page 7 of 16

8. Additional Information

If available, check the box to the left and attach copies of the following documents.

- 38 Bank statements for each open account (redact all but the last 4 digits of account numbers).
- 39. Bank reconciliation reports for each account.
- 40. Financial reports such as an income statement (profit & loss) and/or balance sheet.
- 41. Budget, projection, or forecast reports.
- ☐ 42. Project job costing, or work-in-progress reports.



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FINANCIAL SERVICES STATEMENT

Northeast TX Region - Panhandle - North Central TX Region Prisburg. Mt Pleasant Sulphur Springs

Decatur

Wellington Clarendon Vernon

Е'есто

Icwa Park Witchita Falls Hadiday Windhorst

DON'S BAREFOOT BEACH MARINA, LLC DBA BAREFOOT BAY MARINA & RV RESORT 190 E STACY RD STE 306 #391 ALLEN TX 75002-0000

NTEREST RECEIVED TO DATE	CUSTOMER NUMBER
	320008990
INTEREST TO DATE	FROM DATE TO DATE
	02/29 03/29/2021
SSN	PAGE 1

Please examine your statement at once and report any discrepancy within ten days. See reverse side for important information ***** SIMPLE BUSINESS

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FINANCIAL SERVICES STATEMENT

Northeast TX Region Panhandie - North Central TX Region
Passourg Wellington I cwa Park
Mt Pleasant Carendon Wichita Fails
Sulphur Springs Vernon Holliday
Decatur Electro Windthorst

DON'S BAREFOOT BEACH MARTNA, LLC
DBA BAREFOOT BAY
MARINA & RV RESORT
190 E STACY RD STE 306 #391
ALLEN TX 75002-0000

Please examine your statement at once and report any discrepancy within ser days. See reverse side for important information

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FINANCIAL SERVICES STATEMENT

Northeast TX Ragion - Penhandle - North Central TX Region Ptsburg Mt Pleasert Sulphur Springs

Decetur

Wellington Clarendon Vection

Electa:

łowa Park Wichita Falls Holliday Windhorse

DON'S BAREFOOT BEACH MARINA, LLC DBA BAREFOOT BAY MARINA & RV RESORT 190 E STACY RD STE 306 #391 ALLEN TX 75002-0000

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Please examine your statement at once and report any discrepancy within ten days. See reverse side for important information,

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FINANCIAL SERVICES STATEMENT

Northeast TX Region - Panhan⊄e - North Central TX Region Wellington Prospurg Carendon Mt Piessant Vemor Sulphur Springs Е'еста Decetur

Icwa Park Wichita Fells Holiday. **VV:nothorst**

DON'S BAREFOOT BEACH MARINA, LLC DBA BAREFOOT BAY MARINA & RV RESORT 190 R STACY RD STE 306 #391 TX 75002-0000 ALLEN

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Please examine your statement at once and report any discrepancy within ten days. See reverse side for important information

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Debits / Credits

Date

2401 S JEFFERSON AVE MT PLEASANT, TX 75455 877-303-3111

Toll Free 877-303-3111 www.pilgrimbank.com Member FDIC

FINANCIAL SERVICES STATEMENT

Northeast TX Region - Panhandle - North Central TX Region Pittsburg Mt ₱ easant Sulphur Springs.

Decatur

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Electro

Towa Park Withta Fels Holliday. Windthorst

DON'S BAREFOOT BEACH MARINA, LLC DBA BAREFOOT BAY MARINA & RV RESORT 190 E STACY RD STE 306 #391 ALLEN TX 75002-0000

INTEREST RECEIVED TO DATE	COSTOMER NUMBER
	310008990
INTEREST TO DATE	FROM DATE TO DATE
	02/29 03/29/2021
SSN	PAGE 5

Please examine your statement at once and report any discrepancy within ten days. See reverse side for important information.

Description

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2401 S JEFFERSON AVE MT PLEASANT, TX 75455 877-303-3111

TX 75002-0000

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FINANCIAL SERVICES STATEMENT

Northeast TX Region - Penhandle - North Central TX Region Pittsburg M; Pleasant

Salphur Sarings

Decatur

Wellington Clerendon Varnon

Electra

Towa Park Wichse Falls Holliday. Windshorst

DON'S BAREFOOT BEACH MARINA, LLC DBA BAREFOOT BAY MARINA & RV RESORT 190 E STACY RD STE 306 #391

INTEREST RECEIVED TO DATE	CUSTOMER NUMBER
	310008990
INTEREST TO DATE	FROM DATE TO DATE
··-	02/29 03/29/202
SSN	PAGE 6

Please examine your statement at ence and report any discrepancy within ten days. See reverse side for important information

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2401 S JEFFERSON AVE MT PLEASANT, TX 75455 877-303-3111

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FINANCIAL SERVICES STATEMENT

Northeast TX Region - Parhandle - North Centrel TX Region Patsburg M¹ Pleasar∎ Sulphur Springs

Wellington Clemention Vemon Electra

Icwa Park Wichta Falls Holiday

DON'S BAREFOOT BEACH MARINA, LLC DBA BAREFOOT BAY MARINA & RV RESORT 190 E STACY RD STE 306 #391 ALLEN TX 75002-0000

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Please exemine your statement at once and report any discrepancy within ten days. See reverse side for important information.

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Case 24-20024 Doc 41 Filed 05/08/24 Entered 05/08/24 21:48:42 Desc Main

DOCUMENT PAGE 16 of 16 at 877-303-3111 or write us at 2401 5 Jefferson, Mt Pleasant, TX 79455 as soon as you can, if you think your statement or receipt is wrong or if you need more information about a transfer on the statement or receipt. We must hear from you no later than 60 days after we sent the PIRSE statement on which the error or problem appeared.

- (1) Tell us your name and account number (if any).
- 12) Describe the error or the transfer you are unsure about, and explain as clearly as you can why you believe it is an error or why you need more information.
- (3) Yell us the dollar amount of the suspected error.

We will investigate your complaint and will correct any error promptly. If we take more than 10 business days to do this, we will credit your account for the amount you think is in error, so that you will have the use of the money during the time it takes us to complete our investigation.

IN CASE OF ERRORS OR INQUIRES ABOUT YOUR BILL: Send your inquiry in winting on a deparate sheet so that the creditor receives it within 60 days after the bill was maded to you. Your written inquity must include:

- (1) Tell us your name and account number,
- (2) A description of the arror and why (to the extent you can explain) you believe π is an error, and
- (3) The dollar amount of the suspected error.

If you have authorized your creditor to automatically pay your bill from your checking or savings accounts, you can stop or reverse payment on any amount you think is wrong by mailing your notices so that the creditor receives it within 16 days after the bill was sent to you.

You remain obligated to pay the parts of your bill not in dispute, but you do not have to pay any amount in dispute. During that same time, the creditor may not take any action to collect disputed amounts or report disputed amounts as delinquent.

This is a summary of your rights; a full statement of your rights and the creditor's responsibilities under the Federal Fair Credit Billing Act will be sent to you both upon request and in response to a billing error notice.

ATM SAFETY PRECAUTIONS

As issuers of Automated Teller Machine (ATM) access devices, we have provided for your information a list of safety precautions regarding the use of automated teller machines. Please muc the following safety premutions:

- When using walk-up or drive-up unmanned ATMs.
 - Remain aware of surroundings, particularly at night, and exercise caution when withdrawing funds;
 - Inspect an ATM before esertor possible tamparing, or for the presence of an unauthorized attachment that could capture information from the access.
 - device or your Personal Identification Number (PIN)
 - Refrain from displaying cash and put it away as soon as the transaction is complete; and
 - Walt to count cash until you are in the safety of a locked enclosure, such as your car or some.
- Do not reveal your personal identification number (PIN) to others. Avoid allowing others to view your PIN entry into an ATM. Memorize your PIN and do not write your PIN or code on your ATM access device.
- Safeguard and protect your access device. Treat it as if it were cash, and if it has an embedded thip, keep the device in a safety envelope to avoid undetected and unauthorized scanning.
- Promptly report a lost or stolen access device and report all crimes to law enforcement officials immediately.
- If you observe suspicious persons or circumstances while approaching or using an ATM, do not use the machine or, if you are in the middle of a transaction, cancel the transaction, take the access device, leave the area, and come back another time or use an ATM at another location.
- Safeguard and securely dispose of ATM receipts.
- Do not surrender information about your access device over the telephone or over the internet, unless to a trusted merchant in a call or transaction initiated by you.
- Promptly review your monthly statement and compare ATM receipts against your statement to protect against ATM fraud.
- If purchasing online with the access device, and transactions by logging out of websites rather than simply closing the web browser to protect against Internet fraud.